

APPLICATION FOR EMPLOYMENT An Equal Opportunity Employer

Position(s) Applied For:	Position(s) Applied For: Application Date:							
Last Name	First Name		Middle Name					
Last Name	riist Naiile		Middle Name					
Address		City	State	Zip				
Telephone Number(s)			Social Security Number					
relephone Number(s)			Social Security Number					
Best time to contact you at ho	me is:		::	am	pm			
If you are under 18 years of ag	e, can you provide requ	ired proof of your eligibility	y to work?	Yes	No			
Have you ever filed an applicat	Yes	No						
Have you ever been employed	Yes	No						
Do you have any relatives wor	king at the credit union?	If Yes, give name:						
Are you currently employed:				Yes	No			
May we contact your present of	employer:			Yes	No			
Are you prevented from lawfu Status?	lly becoming employed	in the country because of \	/isa or Immigration	Yes	No			
Date available to work:		What is your desired sa	alary range?					
Are you available to work:	Full-Time	Part-Time (Please i	ndicate: Mornings	Afternoons)				
Have you ever been convicted violation?	of a felony, misdemean	or or any other offense oth	ner than a minor traffic	Yes	No			
If Yes, please explain:								
Have you ever engaged in a cive to, failure to pay taxes and sho	_	onesty or breach of trust (including, but not limited	Yes	No			
If Yes, please explain:								
Can you travel if a job requires	it?			Yes	No			
How did you learn about the c	redit union?							

				EDUCATION						
School		Sch	nool Name & Loca	tion		Su	bjects	T	erms Completed	
High School										
College/University										
Trade or Business										
Special Training										
	.,		1.11.1		.					
Typing:	Yes	No	List any addition	al skills you feel ar	e useful to	tne	position for w	nich yo	u are applying:	
10-Key by Touch:	Yes	No								
Computer Skills:	Yes	No								
	1			WORK EXPERIEN	CE		I			
Employment Dates	Emp	Employer Name & Address		Position & J	Position & Job Duties		Salary R		Reason for Leaving	
From: To:										
From:										
To:										
From:										
To:										
From:										
To:										
From: To:										
				REFERENCES						
Name		Addr	ess & Telephone			Bu	ısiness or Per	sonal	Years Known	
I authorize the credit union to credit reporting agencies and damage that may result from understand that, if employed; f will be "at will". That is, either I of its employment decision-mak mentioned in the application for	other sour furnishing alsified state or the creating, may re	ces. I req information atements dit union equest inf	uest all persons who had not o you. I certify that to the application shall may end the employmer	ave information to disclothe facts contained in the grounds for immediant relationship at any time	ose it to the creation as application as ate dismissal. I be for any reason	edit u are tr unde or fo	inion, and I release rue and complete t erstand and agree t or no reason. I under	e all perso the bes hat if empostand that	ons from liability for an st of my knowledge an ployed, the employmen t the credit union, as pa	

Signature

Date